

Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

1. Agency Name

City of San Jose  
Division, Department, or Region (If Applicable)

Parks, Recreation and Neighborhood Services Dept.  
Designated Agency Contact (Name, Title)

Keila Cisneros

Area Code/Phone Number  
408 743 5594

E-mail

Keila.Cisneros@sanjoseca.gov

Date Stamp

San Jose City Clerk  
2016 JAN 26 PM 3:11

California Form 802

For Official Use Only

☐ Amendment (Must provide explanation in Part 3.)

Date of Original Filing: \_\_\_\_\_  
(Month, Day, Year)

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐

Face Value of Each Ticket/Pass \$ 188

Event Description Hockey Game (sharks vs. Kings)  
Provide Title/Explanation

Date(s) 1, 24, 16

Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐

If no: \_\_\_\_\_  
Name of Source

Was ticket distribution made at the behest of agency official? No ☐ Yes ☒

If yes: \_\_\_\_\_  
Official's Name (Last, First)

3. Recipients

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
City of San Jose, Parks Recreation and Neighborhood Services	8	Recognition of Outstanding team performance and project success
Viva Calle SJ Event Team		

B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:

C. Name of Outside Organization (include address and description)	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

  
Signature of Agency Head or Designee

Keila Cisneros  
Print Name

Recreation Leader  
Title

1/25/16  
(Month, Day, Year)

Comment:



# San Jose Arena Authority

## Pavilion Ticket Outreach Information

Event: Sharks v. ~~Lightning~~ *Kings*

Event Date: January 24, 2016

Applicant Name: Keila Cisneros

Applicant Email: [keila.cisneros@sanjoseca.gov](mailto:keila.cisneros@sanjoseca.gov)

Applicant Organization: PRNS Viva CalleSJ Event Team

Number of tickets issued: 8

Ticket Price: \$ 188

Ticket location(s):

Section 114, Row 7, Seats 4-11

Parking: 36-39

Applicant Confirmation Date: 11/13/15

Pick-up Notification Sent: 11/20/15